

This portion MUST be returned with your payment to ensure proper credit. THANK YOU

ACCOUNT BILLED
CLARIDGE, REX C.

PROJECT NAME
BLOWOUT/FIRSTCHANCE

PROJECT ID
S230039

DUE DATE	ANNUAL FEE	PAST DUE	AMOUNT DUE
7/30/1999	\$ 100	\$ 0	\$ 100

<input type="checkbox"/> FEE NOT ENCLOSED
Permittee requests an inspection to close out this permit.

TAX ID OR SOCIAL SECURITY #

DIVISION OF OIL GAS AND MINING
1594 WEST NORTH TEMPLE SUITE 1210
PO BOX 145801
SALT LAKE CITY UT 84114-5801

<i>Change of Address</i>	
Contact	
Address	
State	Zip
Phone	

Please make check payable to:
Division of Oil, Gas and Mining